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AUTHOR Engs, Ruth C.; Hanson, David J.
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ABSTRACT

The knowledge of alcohol and drinking behavior of collegiate nursing students was studied in 1982-1983 and 1984-1985. The questionnaire included demographic items, questions regarding the consumption of alcohol, 36 items tapping knowledge of alcohol, and 17 items concerning possible consequences of drinking. The 1982 sample consisted of 291 students at 72 four-year institutions, while the 1984 sample consisted of 170 students at the same institutions 2 years later. There were significant differences over time in responses to only three of the alcohol knowledge items. The findings indicate stability in the drinking patterns and problems of nursing students as well as in their alcohol knowledge. This suggests that greater efforts should be made to improve alcohol education at the collegiate level, especially in the preparation of nurses. Fifteen references are listed. (SW)

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Nursing Students' Alcohol Knowledge
and Drinking Behavior over Time

by

Ruth C. Engs, R.N., Ed.D.

Indiana University

Bloomington, Indiana

and

David J. Hanson, Ph.D.

State University of New York

College at Potsdam

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Nursing Students' Alcohol Knowledge and Drinking Behavior over Time

Alcoholism and alcohol abuse constitute the nation's number one drug problem and a significant proportion of Americans are either directly or indirectly affected by alcohol related problems (National Institute on Alcohol Abuse and Alcoholism, 1978). Yet ironically, alcohol problems often remain unrecognized and the victims remain undiagnosed and untreated. While the diagnostic clues are often vague and subtle, part of the difficulty may lie in the lack of adequate alcohol education in nursing and medical schools (Hasselblad, 1984) both for self-awareness and information which could be used professionally. As primary care providers, nurses are in an excellent position to recognize drinking problems and alcoholism. Therefore, it is imperative that they become free of alcohol myths and misinformation early in their educational careers.

Unfortunately, an even more serious difficulty in detection and action is that many nurses themselves appear to suffer from alcohol abuse and alcoholism (Bissell & Haberman, 1984; Hendrix & LaGodna, 1986; Lee & Ventres, 1981; Lachman, 1986; Penny, 1986). In 1978, Isler reported that 40,000 nurses in the United States were alcoholic and Jefferson and Esnor (1982) indicated that 67% of the disciplinary proceedings brought against nurses in 35 states were related to some form of chemical abuse. The American Nurses Association estimated that the number of chemically dependent

may be as high as 200,000 (Morse et al., 1984) and Buxton et al. (1984) estimate that eight to ten percent (135,000 - 170,000) of the total number of 1.7 million nurses (RNs and LPNs) in the United States suffer alcohol and other drug dependence.

Given the high alcohol abuse rates among nurses, surprisingly little is known about the alcohol knowledge and drinking patterns of student nurses. Engs (1981) found that the most commonly used drug among medical, nursing and pharmacy students in Australia was alcohol. Sixty-five percent of the nursing students consumed alcohol at least once per month. Haack and Harford (1984), in a study of senior students at an undergraduate program of a college of nursing in the northern part of the United States, found a somewhat higher percentage to be frequent drinkers and heavy drinkers than found among other female collegians. Additionally, about 10% reported that alcohol interfered with their school work and 4% with their job. The combined proportion with either problem was 13%. Engs and Rendell (in press) found that over 90% of Scottish nursing students drank, with 44.5% drinking at least once per month.

Haack and Harford (1984) observed that most undergraduate nursing programs offer only two to four clock hours of instruction on addictions, while some schools provide none. Thus, the purpose of the research reported here is to examine the alcohol knowledge and drinking behavior of collegiate nursing students from throughout the United States in 1982-83 and 1984-85.

METHODS

Instrument

An identical anonymous pre-coded questionnaire was used in both 1982-83 and 1984-85. It included demographic items, questions regarding the consumption of alcohol, 36 items tapping knowledge of alcohol, and 17 items concerning possible consequences of drinking.

The 36 "true-false" alcohol knowledge items were wide-ranging: "Alcohol is not a drug," "A person cannot become an alcoholic by just drinking beer," "The U.S. lacks a national consensus on what constitutes responsible use of alcoholic beverages," "Approximately 10% of fatal highway accidents are alcohol related," "Proof on a bottle represents half the percent of alcohol contained in the bottle," etc.

The 17 items regarding problems asked if respondents had, within the last year, had a hangover, driven a car after having had several drinks, had trouble with the law because of drinking, gotten into a fight after drinking, etc.

All questionnaire items had been pre-tested prior to earlier research (Engs, 1977; Hanson, 1972) and instructions explained the voluntary nature of participation.

Samples

The 1982-83 sample consisted of nursing students (N - 291) from a sample of 4,885 students at 72 four-year colleges and universities located throughout the United States. The 1984-85 sample consisted of nursing students (N - 170) from a sample of 4,266 students at the same institutions two years later.

In both the 1982-83 and 1984-85 studies, the data were gathered from in-class administration of the questionnaire in survey-type sociology and health or physical education classes that had a high probability of containing students from every academic major and class year. The response rate exceeded 98% and, with the exception of females (who were slightly over-represented), the demographic composition of both studies closely approximated that of all students attending four-year colleges and universities in the United States.

FINDINGS

Alcohol Knowledge

There were significant differences ($p < .05$) over time in responses to only three of the alcohol knowledge items. One involved an increase in correct responses to "It takes about as many hours as the number of beers drunk to completely burn up the alcohol ingested" (53.6% to 80.8%). However, there were decreases in correct answers to "Drinking milk before drinking an alcoholic beverage will slow down the absorption of alcohol into the body" (55.7 to 43.6%) and to "Proof on a bottle of liquor represents half the percent of alcohol contained in the bottle" (52.0 to 38.7%).

Drinking Behaviors and Problems

The drinking levels exhibited by nursing students over time can be seen in Table 1. None of the differences over time were significant

Table 1 about here

Similarly, as Table 2 indicates, there was no significant

Table 2 about here

differences in the proportion of students experiencing any of 17 drinking problems over time.

CONCLUSION

The findings of this study indicate remarkable stability in the drinking patterns and problems of nursing students as well as in their alcohol knowledge. This suggests that greater efforts should be made to improve alcohol education at the collegiate level, especially in the preparation of nurses.

TABLE 1
Drinking Levels among Nursing Students
over Time, in Percent

<u>Level</u>	<u>1982-83 (N=291)</u>	<u>1984-85 (N=170)</u>
Never	24.4	27.6
Infrequent	10.3	13.5
Light	14.1	15.3
Moderate	22.0	18.8
Moderately Heavy	19.2	17.1
Heavy	10.0	7.6

TABLE 2

Drinking Problems Experienced during Previous Year
by Nursing Students Who Drink, over Time, in Percent

<u>Problem</u>	<u>1982-83(N=218)</u>	<u>1984-85(N=123)</u>
Have had a hangover	64.2	66.7
Have gotten nauseated and vomited from drinking	36.2	38.2
Driven a car <u>after</u> having several drinks	48.6	48.0
Driven a car when you knew you had too much	32.3	27.6
Driven a car while drinking	35.9	34.1
Come to class after having several drinks	4.6	2.4
"Cut a class" after having several drinks	2.3	4.1
Missed a class because of a hangover	12.8	17.1
Arrested for DWI (Driving While Intoxicated)	0.5	0.0
Been criticized by someone you were dating because of your drinking	9.2	5.7
Trouble with the law because of drinking	2.3	0.8
Lost a job because of drinking	0.5	0.0
Got a lower grade because of drinking too much	2.3	2.4
Gotten into trouble with the school administration because of behavior resulting from drinking too much	0.9	0.0
Gotten into a fight after drinking	8.3	9.8
Thought you might have a problem with your drinking	2.8	3.3
Damaged property, pulled false fire alarm, or other such behavior after drinking	3.7	0.0

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